

ISSUE SLIP STAPLE AREA (for additional cross references)

DESCRIPTION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		112	12/31/02
FORMALITY REVIEW	T.A	JOSUM	06/04/01
RESPONSE FORMALITY REVIEW	MA	830	01-08-02

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	12/9/02
1	2/29/03
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
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